

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 623037	RECEIPT DATE:	08 / 24 / 00
IA NUMBER:	PCT/ DE98 / 02949	IA FILING DATE:	10 / 02 / 98
FAMILY NAME:	GUNDLACH	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	MICHAEL	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	02 / 27 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	POO 1249	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX
NAME:	SCHIFF HARDIN WAITE		
STREET:	6600 SEARS TOWER		
CITY:	CHICAGO		
STATE/COUNTRY:	USX	ZIP:	606066473
EMAIL:			
APPLICATION TITLES:			
	METHOD AND DEVICE FOR SECURING ACCESS TO A SERVICE IN A TELECOMMUNICAT		
	IONS NETWORK		

TAB TO LAST POSITION,PUSH SEND



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5597

SERIAL NUMBER 09/623,037	FILING DATE 08/24/2000 RULE	CLASS 380	GROUP ART UNIT 2132	ATTORNEY DOCKET NO. P00.1249	
APPLICANTS Michael Gundlach, Munchen, GERMANY; Bernhard Nauer, Munchen, GERMANY; ** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/DE98/02949 10/02/1998 ** FOREIGN APPLICATIONS ***** GERMANY 198 08 523.0 02/27/1998 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/11/2000					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Wland</i> Examiner's Signature <i>Wland</i> Initials <i>Wland</i>		STATE OR COUNTRY GERMANY	SHEETS DRAWING 2	TOTAL CLAIMS 3	INDEPENDENT CLAIMS 1
ADDRESS Kevin R. Spivak Morrison & Foerster LLP 2000 Pennsylvania Avenue, N.W. Washington, ,DC 20006-1888					
TITLE Method and device for securing access to a service in a telecommunications network					
FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		